

ATTACHMENT 12
CONTRACTOR and RESELLER INFORMATION
(for ordering and contract administration purposes)

CONTRACTOR/COMPANY INFORMATION	
Company Name:	Spectrum Industries Inc.
Address (from first page of bid):	925 First Avenue Chippewa Falls WI 54729
Company Website:	www.spectrumfurniture.com
Federal ID #:	39-1094074
NYS Vendor ID #:	1000009267
Contract Administrator Name:	Judy Steinmetz
Title:	Contract Manager
Email:	jsteinmetz@spectrumfurniture.com
Phone:	715-738-2162
Toll Free Phone:	1-800-235-1262 x 2162

SALES/BILLING (if different from above)	
Contact Name:	Larry Lindenauer
Title:	Territory Manager
Address:	925 First Avenue Chippewa Falls WI 54729
Email:	llindenauer@spectrumfurniture.com
Phone:	518-744-8229
Toll Free Phone:	1-800-235-1262

EMERGENCIES	
Contact Name:	Larry Lindenauer
Title:	Territory Manager
Address:	925 First Avenue Chippewa Falls WI 54729
Email:	llindenauer@spectrumfurniture.com
Phone:	518-744-8229
Cell Phone:	518-744-8229

RESELLER INFORMATION	
Company Name:	Audio Video Corporation
Address:	213 Broadway Albany NY 12204
Federal ID #:	14-1426006
NYS Vendor ID #:	1000001596
Contact Name:	Sean McKenna
Title:	Sales
Email:	mckenna@audiovideocorp.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	518-449-7213
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

*If a Reseller is allowed to accept payment they MUST have a NYS Vendor ID

RESELLER INFORMATION	
Company Name:	Audio Visual Sales & Services Inc.
Address:	2601 Curry Road Schenectady NY 12303
Federal ID #:	14-1702040
NYS Vendor ID #:	1000007056
Contact Name:	Glenn Lupien
Title:	General Manager
Email:	glupien@avssi.com
Hours of Availability:	M-F 8:30 am - 5:00 pm EST
Phone:	877-280-0874
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	BAK USA Technologies Corp
Address:	425 Michigan Avenue Buffalo NY 14203
Federal ID #:	47-4196114
NYS Vendor ID #:	1100155996
Contact Name:	Jennie Emhof
Title:	Product Manager
Email:	Jennie.emhof@bakusa.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	716-328-6011
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Advanced Presentation Systems D/B/A CCS Presentation Systems
Address:	132 Northeastern Boulevard Nashua NH 03062
Federal ID #:	04-3428899
NYS Vendor ID #:	1100033130
Contact Name:	Chris Gamst
Title:	Vice President
Email:	cgamst@ccsnewengland.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	978-256-2001 x 256
MWBE and/or SDVOB Certification:	<input checked="" type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
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RESELLER INFORMATION	
Company Name:	CDW Government LLC
Address:	230 N Milwaukee Avenue Vernon Hills IL 60061
Federal ID #:	36-4230110
NYS Vendor ID #:	1000009217
Contact Name:	Yolanda Blomquist
Title:	Deputy Program Manager
Email:	yaguilar@cdw.com
Hours of Availability:	M-F 7:00 am – 7 pm CST
Phone:	312-705-4680
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Custom Computer Specialists Inc.
Address:	70 Suffolk Ct. Hauppauge NY 11788
Federal ID #:	11-2497640
NYS Vendor ID #:	1000005692
Contact Name:	Laura Gavey
Title:	Associate Director Sales Operations
Email:	lgavey@customonline.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	631-761-1428
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	District Holdings Inc.
Address:	37 Market Street Kenilworth NJ 07033
Federal ID #:	22-3242083
NYS Vendor ID #:	1100165813
Contact Name:	Susan Grant
Title:	Project Development
Email:	SGrant@diversifiedus.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	850-449-0627
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input type="checkbox"/> Ship Direct <input type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

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RESELLER INFORMATION	
Company Name:	HB Communications Inc.
Address:	60 Dodge Avenue North Haven CT 06473
Federal ID #:	06-0770059
NYS Vendor ID #:	1100008493
Contact Name:	Matt Rose
Title:	Product Manager Display Technology
Email:	Matt.rose@hbcommunications.com
Hours of Availability:	M-F 9:00 am – 5:00 pm EST
Phone:	203-234-9246 X 7092
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Direct Packet Inc. D/B/A One Vision Solutions
Address:	165 Jordan Road Troy NY 12180
Federal ID #:	20-1005886
NYS Vendor ID #:	1000008553
Contact Name:	Josh Haase
Title:	Account Manager
Email:	bhall@onevisionsolutions.com
Hours of Availability:	M-F 8:00 am – 5:00 pm CST
Phone:	518-283-9060 x203
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	IVCI LLC
Address:	601 Old Willets Path Hauppauge NY 11788
Federal ID #:	20-0399584
NYS Vendor ID #:	1000016518
Contact Name:	Brendan Donohue
Title:	Director of Business Operations
Email:	bdonohue@ivci.com
Hours of Availability:	M-F 8:00 am – 4:00 pm EST
Phone:	1-800-224-7083
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

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RESELLER INFORMATION	
Company Name:	PC University Distributors Inc.
Address:	99 West Hawthorne Avenue Suite 521 Valley Stream NY 11580
Federal ID #:	11-3318287
NYS Vendor ID #:	1000005921
Contact Name:	Geoffrey Miller
Title:	President
Email:	gmm@pcuniversity.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	516-596-1500 / 888-728-0001
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Presentation Concepts Corp.
Address:	6517 Basile Rowe East Syracuse NY 13057
Federal ID #:	16-1535373
NYS Vendor ID #:	1000029419
Contact Name:	Timothy J. Butz
Title:	President
Email:	tbutz@pccav.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	315-437-1314
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Presentation Products Inc.
Address:	12th Floor 171 Madison Avenue New York NY 10001
Federal ID #:	22-3348910
NYS Vendor ID #:	1000017114
Contact Name:	Ian Singh
Title:	Purchasing Manager
Email:	isingh@presentationproducts.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	212-736-6353
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

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RESELLER INFORMATION	
Company Name:	Sensory Technologies LLC
Address:	10 Vantage Point Drive Rochester NY 14624
Federal ID #:	20-4438772
NYS Vendor ID #:	1100161158
Contact Name:	Bill Riley
Title:	Regional Manager
Email:	briley@sensorytechnologies.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	585-500-8782
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Signal Perfection LTD
Address:	10-40 45 th Avenue Long Island NY 11101
Federal ID #:	52-1760942
NYS Vendor ID #:	1000033462
Contact Name:	Christina Iacovelli
Title:	Sales Administrator
Email:	bids@avispl.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	813-884-7168
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Troxell Communications Inc.
Address:	1623 Military Rd #529 Niagara Falls NY 14304
Federal ID #:	86-0716114
NYS Vendor ID #:	1000009741
Contact Name:	Joel Ryan
Title:	Account Executive
Email:	Joel.ryan@trox.com
Hours of Availability:	M-F 8:00 am – 5:00 pm
Phone:	716-754-7444
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
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RESELLER INFORMATION	
Company Name:	Video Hi-Tech Corp.
Address:	125 Gazza Boulevard Farmingdale NY 11757
Federal ID #:	11-2765013
NYS Vendor ID #:	1000005772
Contact Name:	Danielle Imm
Title:	Purchasing Supervisor
Email:	sales@adwarvideo.com
Hours of Availability:	M-F 8:00 am – 5:00 pm
Phone:	631-777-7070
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Whalley Computer Associates Inc.
Address:	One Whalley Way Southwick MA 01077
Federal ID #:	04-2902969
NYS Vendor ID #:	1100041604
Contact Name:	Mark Duarte
Title:	Vendor Contracts and Reimbursement Manager
Email:	hmd@wca.com
Hours of Availability:	M-F 8:00 am – 5:00 pm
Phone:	508-634-1166
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input checked="" type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	IVCI LLC
Address:	601 Old Willets Path Hauppauge NY 11788
Federal ID #:	20-0399584
NYS Vendor ID #:	1000016518
Contact Name:	Brendan Donohue
Title:	Director of Business Operations
Email:	bdonohue@ivci.com
Hours of Availability:	M-F 8:00 am – 4:00 pm EST
Phone:	1-800-224-7083
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

*If a Reseller is allowed to accept payment they MUST have a NYS Vendor ID

RESELLER INFORMATION	
Company Name:	Tele-Measurements Inc.
Address:	145 Main Ave Clifton NJ 07014
Federal ID #:	22-1694543
NYS Vendor ID #:	1000016841
Contact Name:	Lauren Rutkowski
Title:	Administrative Assistant
Email:	lauren@tele-measurements.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	973-473-8822
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input type="checkbox"/> NYS Certified Minority Owned <input type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

RESELLER INFORMATION	
Company Name:	Tony Baird Electronics Inc.
Address:	461 E. Brighton Ave. Syracuse NY 13210
Federal ID #:	20-2548047
NYS Vendor ID #:	1100022038
Contact Name:	Jerry Galluzzo
Title:	VP Distribution Services
Email:	jgalluzzo@tonybairdelectronics.com
Hours of Availability:	M-F 8:00 am – 5:00 pm EST
Phone:	718-806-4040
MWBE and/or SDVOB Certification:	<input type="checkbox"/> NYS Certified Women Owned <input checked="" type="checkbox"/> NYS Certified Minority Owned <input checked="" type="checkbox"/> SDVOB
SBE:	<input type="checkbox"/> NYS Small Business Enterprise (self-identified)
Reseller is Authorized to: (check all that apply)	<input checked="" type="checkbox"/> Take orders <input checked="" type="checkbox"/> Ship Direct <input checked="" type="checkbox"/> Receive Payment *
Restrictions Applicable to this Reseller (if any):	

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